2131

PTO/SB/21 (09-04)

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APR 1 3 2005

TRANSMITTAL FORM

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Total Number of Pages in This Submission

	to be a series of the series o					
	Application Number	09/898,286				
	Filing Date	July 3, 2001				
	First Named Inventor	Geoffrey Donald Tremain				
	Art Unit	2131				
	Examiner Name	Eleni A. Shiferaw				
	Attorney Docket Number	1821-01100				

ENCLOSURES (check all that apply)									
☐ Fee Transmittal Form	☐ Drawing(s)	After Allowance Communication to Group							
☐ Fee Attached	Licensing-related Papers	Appeal Communication to Board							
☐ Amendment/Reply	Petition	of Appeals and Interferences							
☐ After Final ☐ Affidavits/declaration(s) ☐ Extension of Time Request	Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter							
Express Abandonment Request	☐ Terminal Disclaimer	☐ Other Enclosure(s) (please identify below): Acknowledgement postcard							
☐ Information Disclosure Statement	Request for Refund								
Certified Copy of Priority Document(s)	CD, Number of CD(s)	,							
Response to Missing Parts/ Incomplete Application	☐ Landscape Table on CD								
Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks								
SIGNATURE O	F APPLICANT, ATTORNEY,	OR AGENT							
Firm CONLEYROSE, P. C. Signature // www.lessensessessessessessessessessessessesse									
Printed name Marcella D. V	Printed name Marcella D. Watkins								
Date April 1-1, 200		o. 36,962							
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Signature	Date	April 11, 2005							

148273.01/1821.01100

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PTO/SB/17 (12-04V2))

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Effective on 12/08/04. Effective on 12/08/04. Effective on 12/08/04. Effective on 12/08/04.	Complete if Known								
FEE TRANSMITTAL	Application Number	09/898,286							
- 0005	Filing Date	July 3, 2001							
APR 1 3 2005 For FY 2005	First Named Inventor	Geoffrey Donald	Tremain						
	Examiner Name	Eleni A. Shiferaw	v						
Applicant Paims small entity status. See 37 CFR 1.27	Art Unit	2131							
TOTAL AMOUNT OF PAYMENT (\$)450.00	Attorney Docket No.	1821-01100							
METHOD OF PAYMENT (check all that apply)	<u> </u>								
` '''									
Check Credit Card Money Order None Other (please identify):									
	Deposit Account Number:: 03-2769 Deposit Account Name: Conley Rose, P.C.								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
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and authorization on PTO-2038. FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	RCH FEES	EXAMINATION	N FEES						
Application Type Fee (\$) Small Entity Fee (\$)	\$) Small Entity Fee (\$)	Fee (\$) Sma		Fees Paid (\$)					
Utility 300 150 500		200	100						
Design 200 100 100	50	130	65						
Plant 200 100 300	150	160	80						
Reissue 300 150 500	250	600	300	-					
Provisional 200 100 (0	0	0						
2. EXCESS CLAIM FEES				Small Entity					
Fee Description			Fee (\$)	Fee (\$)					
Each claim over 20 (including Reissues)			50	25					
Each independent claim over 3 (including Reissues)			200	100					
Multiple dependent claims			360	180					
Total Claims Extra Claims Fee (\$)	Fee Paid (\$)	Multiple Depe							
$\frac{64}{100} - 55 \text{ or HP} = \frac{9}{100} \times \frac{50}{100} = \frac{1}{100}$	= <u>450</u>	<u>Fee (\$)</u>	<u>F</u>	Fee Paid (\$)					
HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$)	Eco Poid (\$)		-						
	Fee Paid (\$) = 00.00								
HP = highest number of independent claims paid for, if greater the									
3 ADDI ICATION SIZE EEE									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Fees Paid (\$)									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge):									
SUBMITTED BY									
Signature Mary Mary Mary	Registration No. 36,962	2 Telephon	ne (712	.) 238-8000					
Signature //www.fich	(Attorney/Agent) 30,902) 238-8000					
Name (Print/Type) Marcella D. Watkins		Date	Apr	ril 11, 2005					

148275.01/1821.01100
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